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USPTO FACSIMILE COVER SHEET

To: Commissioner for Patents
Fax Number: (703) 872-9306
Date: February 23, 2005
Pages: 21 pages (including this cover sheet)

MESSAGE:

SYSTEM AND METHOD FOR WEB PAGE ACQUISITION

Application No. 09/821,400
Examiner Ramy M. Osman
Art Unit 2157

Request for Continued Examination (in duplicate)
Amendment Transmittal
Amendment

JP919990315US1
(590.048)

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FERENCE & ASSOCIATES
Amendment Transmittal

Atty. Docket No. JP919990315US1
(590.048)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Seki et al.
Serial No. : 09/821,400 Examiner : R. Osman
Filed : March 29, 2001 Group Art Unit : 2157
For : SYSTEM AND METHOD FOR WEB PAGE ACQUISITION

HON. COMMISSIONER OF PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

1. ☐ Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.
- OR
2. ☒ In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
3. ☐ Small Entity status of this application has been established by a verified statement previously submitted.
4. ☐ A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF FACSIMILE TRANSMITTAL

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being facsimile transmitted on (703) 872-9306 on February 23, 2005 to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stanley D. Ference III

(Type or print name of person transmitting paper or fee)

(Signature of person transmitting paper or fee)

Page 1 of 2

FERENCE & ASSOCIATES
Amendment Transmittal

Atty. Docket No. JP92000341US1
(590.158)

5. ☐ Also enclosed: _____
6. ☒ No additional filing fee is required.
7. ☐ The filing fee has been calculated as shown below:

| | Claims Remaining After Amendment (Col. 1) | Highest No. Prev. paid for (Col. 2) | Present Extra (Col. 3) | SMALL ENTITY | | | OTHER THAN A SMALL ENTITY | |
|--|---|--|------------------------------|--------------|------|---|------------------------------|------|
| | | | | RATE | FEE | | RATE | FEE |
| Total | 20 | ** 20 | = * 0 | x \$9 | = | O | x \$18 | = |
| Claims | | | | | | R | | |
| Ind. | 8 | *** 8 | = * 0 | x \$44 | = | O | x \$88 | = |
| Claims | | | | | | R | | |
| <input type="checkbox"/> Multiple Dependent Claim Presented | | | | + \$150 | = | O | + \$300 | = |
| | | | | | | R | | |
| | | | | TOTAL | = \$ | O | TOTAL | = \$ |
| | | | | | | R | | |

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

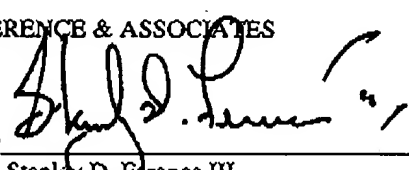
** If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space.

*** If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8. ☐ Applicant encloses herewith a check for \$_____ to cover the filing fee.
9. ☐ The Commissioner is hereby authorized to charge the \$_____ filing fee to Deposit Account No. 50-0510.
10. ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510.

Respectfully submitted,

FERENCE & ASSOCIATES

By 
Stanley D. Ference III
Reg. No. 33,879

Dated: February 23, 2005

Mailing Address:

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